PTO/SB/22 (12-04) Approved for use through 7/31/2006. OMB 0651-0031

Ander the Paperwork Reduction Act of 1995, no persons are required	Docket Number (Optional)				
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		16.	Z-021CP2		
Application Number 10/664587-Conf.	#3678	Filed Se	ptember 16, 20	03	
For METHOD AND APPARATUS FOR SORTING	3 PARTICLES				
Art Unit 3651		Examiner	J. A. Dillon		
This is a request under the provisions of 37 CFR 1.1 identified application.		_			
The requested extension and fee are as follows (che	eck time period desi			elow):	
X One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee		20.00	
		\$60		80.00	
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$		
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
X Applicant claims small entity status. See 37 (CFR 1.27.				
A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
The Director has already been authorized to o	charge fees in this a	pplication to a Dep	osit Account.		
X The Director is hereby authorized to charge a	•			oont to	
Deposit Account Number 12-0080		sed a duplicate cor			
I am the applicant/inventor					
applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
x attorney or agent of record. Registration Number 38,220					
attorney or agent under 37 CFR 1.34.					
Registration dumber if acting un	nder 37 CFR 1.34				
- Authory sussessed	<u> </u>	Octobe	er 12, 2005		
Signature			Date		
Anthory A. Laurentano Typed or printed name		(617) 227-7400 Telephone Number			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more					
than one signature is required, see below.					
Total of 1 forms are submitted.					

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV682324316US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 12, 2005

Signature:

autur (MAnthony A. Laurentano)

60.00 DA

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PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/664587-Conf. #3678 **Application Number** FEE TRANSMITTAL September 16, 2003 Filing Date First Named Inventor Sebastian BÖHM For FY 2005 **Examiner Name** J. A. Dillon Applicant claims small entity status. See 37 CFR 1.27 3651 Art Unit TOTAL AMOUNT OF PAYMENT TGZ-021CP2 60.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Lahive & Cockfield, LLP x Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x | Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES Small Entity

Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) Multiple Dependent Claims

22 - 23	3 =	x	=	Fee (\$)	Fee Paid (\$)
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		

7 - 10 = x = 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

sheets or traction	inereoi. See 35 U.S.C	41(a)(1)(G) and 3/ CFR 1.16(s).			
<u>Total Sheets</u>	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)		Fee Paid (\$)
100	=	(round up to a whole number) x		_ =	
4. OTHER FEE(S)					Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)					
Other (e.g., late filing surcharge): 2251 Extension for response within first month				60.00	

SUBMITTED BY						· · · · · · · · · · · · · · · · · · ·
Signature	Authory	autabuto	Registration No. (Attorney/Agent)	38,220	Telephone	(617) 227-7400
Name (Print/Type)	Anthony A. Laurentan	0			Date	October 12, 2005

I hereby certify that this correspondence is t	peing deposited with the U.S. Postal Se	ervice as Express Mail, Airbill No. EV682324316US,
in an envelope addressed to: MS Amendme	ent, Commissioner for Patents, P.O. Bo	ox 1450, Alexandria, VA 22313-1450, on the date
shown below.	1) 11	1

Dated: Óctober 12, 2005

Signature

Julium famultura Anthony A. Laurentano)